Application No. 09/892,993

Amendment dated: April 26, 2006

Reply to Office Action mailed January 26, 2006

Amendments to the Claims

This listing of claims will replace all prior versions and listings of claims in the Application.

1 to 25. (Canceled)

26. (Previously Presented) A method for repairing a defect area at the gradient junction of cartilaginous tissue and bony tissue, comprising the steps of:

providing a composite scaffold with a porous ceramic phase, a porous polymer phase, the polymer phase attached to the ceramic phase at an interphase region where the polymer phase is at least partially infused into the ceramic phase mechanically interlocking the ceramic and polymer phases, with the porosity of the ceramic and polymer phases communicating;

boring a receptacle space in the gradient junction at the site of the injury to receive the scaffold, the gradient junction being that of articular cartilage; and

placing and securing the scaffold in the receptacle space with the ceramic phase adjacent to the bony tissue and the polymer phase adjacent to the cartilaginous tissue.

27. (Previously Presented) A method for repairing a defect area at the gradient junction of cartilaginous tissue and bony tissue, comprising the steps of:

providing a composite scaffold with a porous ceramic phase, a porous polymer phase, the polymer phase attached to the ceramic phase at an interphase region where the polymer phase is at least partially infused into the ceramic phase mechanically interlocking the ceramic and polymer phases, with the porosity of the ceramic and polymer phases communicating;

boring a receptacle space in the gradient junction at the site of the injury to receive the scaffold, the gradient junction being that of a spinal disc; and

placing and securing the scaffold in the receptacle space with the ceramic phase adjacent to the bony tissue and the polymer phase adjacent to the cartilaginous tissue.

28. (Previously Presented) A method for repairing a defect area at the gradient junction of cartilaginous tissue and bony tissue, comprising the steps of:

providing a composite scaffold with a porous ceramic phase, a porous polymer phase, the polymer phase attached to the ceramic phase at an interphase region where the polymer phase is at least partially infused into the ceramic phase mechanically interlocking the ceramic and polymer phases, with the porosity of the ceramic and polymer phases communicating;

boring a receptacle space in the gradient junction at the site of the injury to receive the scaffold, the gradient junction being that of the meniscus; and

placing and securing the scaffold in the receptacle space with the ceramic

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phase adjacent to the bony tissue and the polymer phase adjacent to the cartilaginous tissue.

29. (New) The method of Claim 26, wherein the polymer phase comprises a polymer foam.